FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS						
CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) Brian Petrick	(2) 202-64-5428 I.D. Number					
Candidate, Committee or Party Name (3) 900 Meridigh Ave, Un. + 20	14 Migri Beach FL 33139 City State Zip Code					
Address (number and street) ' / City State Zip Code						
Check box if address has changed since last report						
(4) Check appropriate box(es):	CIT 03 F					
Candidate (office sought):						
Political Committee	Check if PC has DISBANDED Check if CCE has DISBANDED Check if CCE has DISBANDED CHECK IT PRINTS CHECK IT POINTS CHECK IT PRINTS CHECK IT POINTS CHECK IT					
Committee of Continuous Existence	Check if CCE has DISBANDED SS P					
Party Executive Committee						
(5) REPORT IDENTIFIERS						
Cover Period: From 10,3/,03 To 11,7,03 Report Type TR2						
Original Amendment Special Election Report Independent Expenditure Report						
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks \$ <u>, 5,000</u> .00	Monetary S_,, O.OO					
Loans \$,	Transfers to Office Account \$,					
Total Monetary \$	Total Monetary \$					
In-kind \$,	(8) Other Distributions \$,,					
(9) TOTAL Monetary Contributions to Date \$ 7,685.00	(10) TOTAL Monetary Expenditures to Date \$,, 847.68					
(11) CERT	IFICATION					
It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)						
I certify that I have examined this report and it is true, correct and complete	I certify that I have examined this report and it is true, correct and complete					
Name of Treasurer Deputy Treasurer	Name of Candidate Chairman (PC/PTY					
X Signature	X Signature					
- Oignature						

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS
(1) Name Prian Detrick (2) I.D. Number 202 (2) I.D. Number 202-64-5428 (3) Cover Period 10 / 31 / 03 through 11 / 7 / 03 (4) Page _____ of ___ (10) (5) Date **Full Name** Contributor (Last, Suffix, First, Middle) (6) In-kind Street Address & Contribution Sequence Description | Amendment **Amount** Type Occupation City, State, Zip Code Type Number 10/3/103 Detrick, Brian, Clayfind I 900 Menidian Ave, Unit 204 I Miumi Beach, FL 33139 LOA

20/3

Name Brian Detrick (2) 1.D. Number 202-64-5428							
3) Cover Period	10,31,03 through 11	17103 (4) Page	of			
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11) Amount		
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